Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

		CLAIMS AS	(Column		<b>i</b> (Colur	mn 2)	_	MALL EN		OR	OTHER SMALL I	
TOTAL CLAIMS							F	RATE	FEE		RATE	FEE
FO	R		NUMBER F	ILED	NUMBI	ER EXTRA	E	BASIC FEE	370.00	OR	BASIC FEE	740.00
то	TAL CHARGEA	BLE CLAIMS	min	minus 20= *			X\$ 9=		OR	X\$18=		
IND	EPENDENT CL	AIMS	mir	nus 3 =	*			X42=		OR	X84=	
MU	LTIPLE DEPENI	DENT CLAIM PF	RESENT					+140=		OR	+280=	
* If	the difference	in column 1 is I	ess than ze	ro, ente	r "0" in c	olumn 2	L	TOTAL		OR	TOTAL	
. :	CI	LAIMS AS A	MENDED		N <b>T II</b> mn 2)	(Column 3)		SMALL E	NTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	. 6	Minus	** 2	2	=		X\$ 9=		OR	X\$18=	
AME	Independent	· 3	Minus	XXX	4	=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDEN	T CLAIM		J [	+140=		OR	+280=	
							l	TOTAL ADDIT. FEE			TOTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)		(DDII. 1 EE				
ENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER HOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	*	Minus	***	IT OL ALL	=	41	X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	II CLAIM		_	+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			umn 2)	(Column 3	)			_		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER /IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ĬŽ	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X42=		OR	X84=	
L	FIRST PRESE	ENTATION OF M	IULTIPLE DE	PENDE	NT CLAIN	A 📄	1			1	+280=	
	If the entry in colu	ımn 1 is less than t	the entry in col	umn 2, wr	rite "0" in c	olumn 3.		+140=		OR	TOTA	
**	If the "Highest Nu	Imber Previously Funder Previously Property Previously	Paid For" IN TH Paid For" IN Th	IIS SPACE IIS SPACE	E is less th E is less th	an 20, enter "2 an 3, enter "3.'	•	ADDIT. FEE	propriate be	OR ox in c	ADDIT. FEI	

Application or Docket Number

P	AT	ENT	APF	PLICAT	NOI	FEE	DETER	MINATION	RECORI	D
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Effective December 29, 1999

(Column 1) (Column 2)								OR	OTHER SMALL I	
FC	R	NUMBE	R FILED	NUMBER I	EXTRA	RATE	FEE	*	RATE	FEE
ВА	SIC FEE				1.54	٤	345.00	OR		690.00
то	TAL CLAIMS	22	minus 20	= ' 2		X\$ 9=		OR	X\$18=	36 00
IND	EPENDENT CLA	AIMS 4	minus 3	=	·	X39=		OR	X78=	78,00
ΜU	LTIPLE DEPEN	DENT CLAIM PR	RESENT			+130=		OR	+260=	
* If	th difference i	n column 1 is l	ess than zero	o, enter "0" in c	column 2	TOTAL		OR	TOTAL	n. FOR
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)					SMALL	ENTITY	OR	OTHER SMALL	THAN
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	4	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Totai	· /5,	Minus	22	=	X\$ 9=		OR	X\$18=	·
AME	Independent	• 4	Minus	4	=	X39=		OR	X78=	
	FIRST PRESE	NTATION OF MU	JUTIPLE DEPE	NDENT CLAIM	<u> </u>	+130=		OR	+260=	
			1	•		TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)	<b>4</b>	(Column 2)	(Column 3)	- A				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	. 6	Minus	22	= —	X\$ 9=		OR	X\$18=	
AME	Independent	· 3	Minus	··· 4	=	X39=		OR	X78=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEPI	ENDENT CLAIR	Л	+130=		OR	+260=	:
			ر کر			TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Column 2)	(Column 3)					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	. 6	Minus	-22	= ->	X\$ 9=		OR	X\$18=	
ME	Independent	. 3	Minus	4	=	X39=		OR	X78=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDENT CLAIR	М	.400		1		
	If the entry in colu	mn 1 is less than t	the entry in colum	nn 2. write "0" in c	olumn 3.	+130= TOTAL		OR	+260= TOTA	
••	If the "Highest Nu	mber Previously P	aid For" IN THIS Paid For" IN THIS	SPACE is less to SPACE is less to	nan 20, enter "20. han 3, enter "3."	" ADDIT. FE	<u> </u>	OR ox in o	ADDIT. FE	

## This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09/5/7426

## Total Fee Calculation

	•			-	
	Fee Code	Total # Cluims	Number Extra X	Fee	Fee - Tour
Basic Filing Fee Total Claims >20 Independent Claims >3 Mult. Dep Claim Present Surcharge English Translation  TOTAL FEE CALCULA Fees due upon filing th Total Filing Fees Due =  Less Filing Fees Submi  BALANCE DUE	Sm./Lg.  201/101		Extra X	Fee Sm. Entiry	Fee = Total  Lg. Entity  690,00 = 690,00  18.00 = 36.00  28.00 = 28.00  130,00 = 130,00  934.00

Figure 7